

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

Date _____

Telephone Number _____

Name of Person Filing

Edward Padilla

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Associated Third Party AdministratorsTrade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Santa Anita AvenueCity El MonteState CaliforniaZIP Code + 4 91731

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Const. Laborers Trust Funds For So. Cal.Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Same as aboveCity State ZIP Code + 4

11.a. Nature of such dealing.

Provides Third party
administrative services to
trust funds

11.b. Approximate dollar value of such dealing.

Unknown

12.a. Nature of interest held or income received.

6-24-04
Dinner at restaurant

12.b. Amount.

\$198.66

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐or Consultant ☐

?

14.b. Amount of payment.